

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Diane Black for Congress

ADDRESS (number and street)

PO Box 1437

Check if different
than previously
reported. (ACC)

Gallatin

TN

37066-1437

2. FEC IDENTIFICATION NUMBER ▼

C

C00472878

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

06

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
10 / 01 / 2013

through

M M / D D / Y Y Y Y
12 / 31 / 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Tommy Whittaker

Signature of Treasurer

Mr. Tommy Whittaker

[Electronically Filed]

Date

M M / D D / Y Y Y Y
01 / 30 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 51

Write or Type Committee Name

Diane Black for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	3

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	99855.00	3628598.41
(b) Total Contribution Refunds (from Line 20(d))	-1000.00	9850.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	100855.00	3618748.41
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	46736.55	2343426.10
(b) Total Offsets to Operating Expenditures (from Line 14).....	25.80	19703.63
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	46710.75	2323722.47
8. Cash on Hand at Close of Reporting Period (from Line 27).....	753375.39	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 51

Write or Type Committee Name

Diane Black for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	3

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than Political Committees**

(i) Itemized (use Schedule A).....

29500.00

919678.51

(ii) Unitemized.....

855.00

36636.25

(iii) TOTAL of contributions from individuals ▶

30355.00

956314.76

(b) Political Party Committees.....

0.00

4500.00

(c) Other Political Committees (such as PACs).....

69500.00

1210130.74

(d) The Candidate.....

0.00

1457652.91

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

99855.00

3628598.41

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

19897.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.)

25.80

19703.63

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

0.00

1024.11

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

99880.80

3669223.15

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 51

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	46736.55	2343426.10
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	1200100.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	1200100.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	-1000.00	8850.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	-1000.00	9850.00
21. OTHER DISBURSEMENTS	0.00	113050.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	45736.55	3666426.10

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	699231.14
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	99880.80
25. SUBTOTAL (add Line 23 and Line 24).....	799111.94
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	45736.55
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	753375.39

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 51

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MRS. NOROMA C. BENZ

Mailing Address 1236 TWELVE STONES CROSSING

City

GOODLETTSVILLE

State

TN

Zip Code

37072-3322

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		13		2013

Transaction ID : SA11.5031

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

CLARK BOYD

Mailing Address 104 MOCKINGBIRD LANE

City

LEBANON

State

TN

Zip Code

37087

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INSURANCE AGENT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		02		2013

Transaction ID : SA11.5041

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DR. VICTOR BRAREN M.D.

Mailing Address 516 TREEMONT TRAIL

City

SPRINGFIELD

State

TN

Zip Code

37172-4741

FEC ID number of contributing
federal political committee.

C

Name of Employer

MID SOUTH UROLOGY

Occupation

UROLOGIST

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		20		2013

Transaction ID : SA11.5035

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 51

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

DR. CHARLES BREWTON

A.

Mailing Address P.O. BOX 800

City

HENDERSONVILLE

State

TN

Zip Code

37077-0800

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2013

Transaction ID : SA11.5016

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JUDY S. FORSTER

B.

Mailing Address 796 PLANTATION WAY

City

GALLATIN

State

TN

Zip Code

37066-7404

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		12		2013

Transaction ID : SA11.5027

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DEBRA E. FOWLER

C.

Mailing Address P.O. BOX 280

City

COLLEGEDALE

State

TN

Zip Code

37315-0280

FEC ID number of contributing
federal political committee.

C

Name of Employer

MCKEE FOODS CORP.

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2013

Transaction ID : SA11.5063

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MR. JOHN C. GARRETT IV

Mailing Address 116 BLUE RIDGE DR.

City

HENDERSONVILLE

State

TN

Zip Code

37075-2665

FEC ID number of contributing
federal political committee.

C

Name of Employer

BONE, MCALLESTER & NORTON, PLLC

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		13		2013

Transaction ID : SA11.5029

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. FERRELL HAILE

Mailing Address 1900 CAIRO RD.

City

GALLATIN

State

TN

Zip Code

37066-8401

FEC ID number of contributing
federal political committee.

C

Name of Employer

PERKINS DRUGS/STATE

Occupation

OWNER/STATE SENATOR

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		12		2013

Transaction ID : SA11.5025

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MARY R. HALL

Mailing Address 1199 CHLOE DRIVE

City

GALLATIN

State

TN

Zip Code

37066-7465

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		21		2013

Transaction ID : SA11.5055

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1300.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 8 OF 51

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

DAVID HIRSCH

A.

Mailing Address 25 CLAPBOARD RIDGE RD

City

GREENWICH

State

CT

Zip Code

06830-3403

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		05		2013

Transaction ID : SA11.5042

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MRS. MARY ANN INMAN

B.

Mailing Address 116 DELFT DR.

City

HENDERSONVILLE

State

TN

Zip Code

37075-3232

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		13		2013

Transaction ID : SA11.5032

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. JEFFREY JOWDY

C.

Mailing Address 228 CIRCLE VIEW DRIVE

City

FRANKLIN

State

TN

Zip Code

37067-1331

FEC ID number of contributing
federal political committee.

C

Name of Employer

LIGHTHOUSE COUNSEL

Occupation

FOUNDER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		07		2013

Transaction ID : SA11.5044

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1450.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

DR. A.S. SID. KING M.D.

Mailing Address 300 STEAM PLANT ROAD
SUITE 300

City	State	Zip Code
GALLATIN	TN	37066-3089

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
PHYSICIAN

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2013

Transaction ID : SA11.5020

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DR. J. MICHAEL LAW

Mailing Address 242 HIDDEN LAKE ROAD

City	State	Zip Code
HENDERSONVILLE	TN	37075-5515

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
DENTIST

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2013

Transaction ID : SA11.5023

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DENA M. MCCARTHY

Mailing Address 895 PLANTATION BOULEVARD

City	State	Zip Code
GALLATIN	TN	37066-4497

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
TRAVEL CONSULTANT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2013

Transaction ID : SA11.5012

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 51

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

ELLSWORTH MCKEE

A.

Mailing Address PO BOX 567

City

COLLEGEDALE

State

TN

Zip Code

37315-0567

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2013

Transaction ID : SA11.5057

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JACK MCKEE

B.

Mailing Address 9530 GLYNN DOWNING DR.

City

OOLTEWAH

State

TN

Zip Code

37363-8141

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2013

Transaction ID : SA11.5056

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

RUSSELL MCKEE

C.

Mailing Address P.O. BOX 1144

City

COLLEGEDALE

State

TN

Zip Code

37315-1144

FEC ID number of contributing
federal political committee.

C

Name of Employer

MCKEE FOODS CORPORATION

Occupation

EVP MANUFACTURING

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		06		2013

Transaction ID : SA11.5043

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 51

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MRS. BEVERLY MCKENZIE

A.

Mailing Address 1110 PLANTATION BLVD.

City

GALLATIN

State

TN

Zip Code

37066-4494

FEC ID number of contributing
federal political committee.

C

Name of Employer

MCKENZIE JEWELERS

Occupation

OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		13		2013

Transaction ID : SA11.5030

Amount of Each Receipt this Period

500.00

CONTRIBUTION

REDESIGNATION/REATTRIBUTION REQUESTED

Full Name (Last, First, Middle Initial)

MS. ROBIN MEYER

B.

Mailing Address 146 BLUEGRASS DRIVE

City

HENDERSONVILLE

State

TN

Zip Code

37075-2710

FEC ID number of contributing
federal political committee.

C

Name of Employer

ROBIN'S NEST INTERIORS

Occupation

OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2013

Transaction ID : SA11.5011

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. LARRY ODOM

C.

Mailing Address 849 PICKWICK COURT

City

GALLATIN

State

TN

Zip Code

37066-7454

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2013

Transaction ID : SA11.5014

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 51

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

JAMES DAVID OWEN

A.

Mailing Address 104 STUART DR.

City

HENDERSONVILLE

State

TN

Zip Code

37075-4318

FEC ID number of contributing
federal political committee.

C

Name of Employer

NASTC, INC

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		12		2013

Transaction ID : SA11.5026

Amount of Each Receipt this Period

200.00

CONTRIBUTION

REDESIGNATION/REATTRIBUTION REQUESTED

Full Name (Last, First, Middle Initial)

MR. RICHARD H. ROWLETT

B.

Mailing Address 2003 CRENCOR DR.

City

GOODLETTSVILLE

State

TN

Zip Code

37072-4314

FEC ID number of contributing
federal political committee.

C

Name of Employer

ROWLETT ADVERTISING SERVICE

Occupation

BUSINESS OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		04		2013

Transaction ID : SA11.5017

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ELMIE A. RUCK

C.

Mailing Address 517 RIDGECREST LANE

City

LEBANON

State

TN

Zip Code

37087-1363

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		21		2013

Transaction ID : SA11.5062

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1200.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 51

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MICHAEL SCHULDER MD

A. Mailing Address INFORMATION REQUESTED

City

INFO REQUEST

State

ZZ

Zip Code

99999

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2013

Transaction ID : SA11.5054

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
 MS. VIRGINIA L. STEWART

Mailing Address P.O. BOX 144

City

BELL BUCKLE

State

TN

Zip Code

37020-0144

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

RANCHER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		20		2013

Transaction ID : SA11.5037

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
 MR. JAMES P. TOTTEN

Mailing Address 108 GOVERNORS POINT BLVD

City

HENDERSONVILLE

State

TN

Zip Code

37075-4064

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2013

Transaction ID : SA11.5061

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6100.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 51

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MR. JAMES P. TOTTEN

Mailing Address 108 GOVERNORS POINT BLVD

City

HENDERSONVILLE

State

TN

Zip Code

37075-4064

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		30		2013

Transaction ID : SA11.5061B

Amount of Each Receipt this Period

-2400.00

CONTRIBUTION

[MEMO ITEM]

REDESIGNATION TO GENERAL

Full Name (Last, First, Middle Initial)

MR. JAMES P. TOTTEN

Mailing Address 108 GOVERNORS POINT BLVD

City

HENDERSONVILLE

State

TN

Zip Code

37075-4064

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		30		2013

Transaction ID : SA11.5098

Amount of Each Receipt this Period

2400.00

CONTRIBUTION

[MEMO ITEM]

REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial)

MRS. JOSEPHINE B. TOTTEN

Mailing Address 108 GOVERNORS POINT BOULEVARD

City

HENDERSONVILLE

State

TN

Zip Code

37075-4064

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		21		2013

Transaction ID : SA11.5060

Amount of Each Receipt this Period

5200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 15 OF 51

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MRS. JOSEPHINE B. TOTTEN

A.

Mailing Address 108 GOVERNORS POINT BOULEVARD

City

HENDERSONVILLE

State

TN

Zip Code

37075-4064

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		30		2013

Transaction ID : SA11.5060B

Amount of Each Receipt this Period

-2600.00

CONTRIBUTION

[MEMO ITEM]

REDESIGNATION TO GENERAL

Full Name (Last, First, Middle Initial)

MRS. JOSEPHINE B. TOTTEN

B.

Mailing Address 108 GOVERNORS POINT BOULEVARD

City

HENDERSONVILLE

State

TN

Zip Code

37075-4064

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		30		2013

Transaction ID : SA11.5096

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

[MEMO ITEM]

REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial)

MR. KENNETH L. VERBLE

C.

Mailing Address 110 THE LANDINGS

City

HENDERSONVILLE

State

TN

Zip Code

37075-5213

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2013

Transaction ID : SA11.5019

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MR. TIM WHEELER

Mailing Address 118 SARANAC TRAIL

City

HENDERSONVILLE

State

TN

Zip Code

37075-4589

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

HOME BUILDER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2013

Transaction ID : SA11.5015

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. L. MICHAEL ZINSER

Mailing Address 914 EMILEE POINT

City

GALLATIN

State

TN

Zip Code

37066-4103

FEC ID number of contributing
federal political committee.

C

Name of Employer

THE ZINSER LAW FIRM

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2013

Transaction ID : SA11.5013

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1500.00

29500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 51

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

ABBOTT LABORATORIES EMPLOYEE PAC

Mailing Address 100 ABBOTT PARK ROAD

City

ABBOTT PARK

State

IL

Zip Code

60064-3502

FEC ID number of contributing
federal political committee.

C C00040279

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2013

Transaction ID : SA11.5070

Amount of Each Receipt this Period

4000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ACTION COMM. FOR RURAL ELECTRIFICATION PAC

Mailing Address 4301 WILSON BOULEVARD

City

ARLINGTON

State

VA

Zip Code

22203-1867

FEC ID number of contributing
federal political committee.

C C00002972

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2013

Transaction ID : SA11.5068

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ALTRIA GROUP, INC. PAC

Mailing Address 101 CONSTITUTION AVENUE NW, STE 40

City

WASHINGTON

State

DC

Zip Code

20001-2155

FEC ID number of contributing
federal political committee.

C C00089136

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2013

Transaction ID : SA11.5089

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

7000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 OF 51

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Diane Black for Congress

Full Name (Last, First, Middle Initial)

AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS AAOS PAC

Mailing Address 317 MASSACHUSETTS AVENUE NE

City
 WASHINGTON

State Zip Code
 DC 20002-5769

FEC ID number of contributing
federal political committee.

C C00343137

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 11 07 2013

Transaction ID : SA11.5024

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

AMERICAN ACADEMY OF FAMILY PHYSICIANS PAC

Mailing Address 1133 CONNECTICUT AVE NW STE 1100

City
 WASHINGTON

State Zip Code
 DC 20036-4342

FEC ID number of contributing
federal political committee.

C C00411553

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 12 15 2013

Transaction ID : SA11.5052

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

AMERICAN BANKERS ASSOCIATION BANK PAC

Mailing Address 1120 CONNECTICUT AVENUE NW

City
 WASHINGTON

State Zip Code
 DC 20036-3905

FEC ID number of contributing
federal political committee.

C C00004275

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y
 12 15 2013

Transaction ID : SA11.5045

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 OF 51

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

AMERICAN COLLEGE OF CARDIOLOGY PAC

Mailing Address 2400 N STREET NW

City

WASHINGTON

State

DC

Zip Code

20037-1153

FEC ID number of contributing
federal political committee.

C C00375360

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 30 / 2013

Transaction ID : SA11.5087

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

AMERICAN HEALTH CARE ASSOCIATION AHCA-PAC

Mailing Address 1201 L STREET N.W

City

WASHINGTON

State

DC

Zip Code

20005-4024

FEC ID number of contributing
federal political committee.

C C00006080

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 24 / 2013

Transaction ID : SA11.5080

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

AMERICAN OPTOMETRIC ASSOCIATION PAC

Mailing Address 1505 PRINCE STREET
SUITE 300

City

ALEXANDRIA

State

VA

Zip Code

22314-2874

FEC ID number of contributing
federal political committee.

C C00024968

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 30 / 2013

Transaction ID : SA11.5090

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

4500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Diane Black for Congress

A. Full Name (Last, First, Middle Initial)
AMERICAN OSTEOPATHIC INFORMATION ASSN PAC

Mailing Address 1090 VERMONT AVE NW, STE 510

City State Zip Code
 WASHINGTON DC 20005-4949

FEC ID number of contributing
federal political committee. **C** C00113803

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 3500.00

Date of Receipt

M M / D D / Y Y Y Y
 12 30 2013

Transaction ID : SA11.5093

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AMERICAN PSYCHOLOGICAL ASSOCIATION PRACTICE ORGANIZATION PAC

Mailing Address PO BOX 65353

City State Zip Code
 WASHINGTON DC 20035-5353

FEC ID number of contributing
federal political committee. **C** C00522094

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt

M M / D D / Y Y Y Y
 12 21 2013

Transaction ID : SA11.5074

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AT&T FEDERAL PAC

Mailing Address 208 S AKARD ST, STE 2701

City State Zip Code
 DALLAS TX 75202-4206

FEC ID number of contributing
federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 2000.00

Date of Receipt

M M / D D / Y Y Y Y
 12 21 2013

Transaction ID : SA11.5065

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 OF 51

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

BANK OF AMERICA PAC

Mailing Address 1455 PENNSYLVANIA AVE. NW STE. 950

City

WASHINGTON

State

DC

Zip Code

20004-1043

FEC ID number of contributing
federal political committee.

C C00364778

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 15 / 2013

Transaction ID : SA11.5053

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

BNSF RAILPAC

Mailing Address PO BOX 961039

City

FORT WORTH

State

TX

Zip Code

76161-0039

FEC ID number of contributing
federal political committee.

C C00235739

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 24 / 2013

Transaction ID : SA11.5076

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

CONOCOPHILLIPS SPIRIT PAC

Mailing Address 1010A PLAZA OFFICE BUILDING

City

BARTLESVILLE

State

OK

Zip Code

74004-0001

FEC ID number of contributing
federal political committee.

C C00112896

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 24 / 2013

Transaction ID : SA11.5077

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

6000.00

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

COX ENTERPRISES PAC- COXOAC, INC.**A.**

Mailing Address 975 F STREET NW, STE 300

City

WASHINGTON

State

DC

Zip Code

20004-1459

FEC ID number of contributing
federal political committee.**C**

C00477653

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		30		2013

Transaction ID : SA11.5085

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

CSX CORP. GOOD GOVERNMENT FUND**B.**

Mailing Address 1331 PENNSYLVANIA AVE NW, STE 560,

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.**C**

C00163832

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		21		2013

Transaction ID : SA11.5067

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DARDEN RESTAURANTS INC. PAC**C.**

Mailing Address 1000 DARDEN CENTER DR

City

ORLANDO

State

FL

Zip Code

32837-4032

FEC ID number of contributing
federal political committee.**C**

C00108282

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		21		2013

Transaction ID : SA11.5072

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

4000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Diane Black for Congress

A. Full Name (Last, First, Middle Initial)
DOCTORS CO FEDERAL PAC
Mailing Address 185 GREENWOOD ROAD

City NAPA	State CA	Zip Code 94558-6270
--------------	-------------	------------------------

FEC ID number of contributing
federal political committee.

C C00300376

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M 12	/	D D D 30	/	Y Y Y Y Y 2013
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Transaction ID : SA11.5099

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DUKE ENERGY CORPORATION PAC
Mailing Address 550 S TRYON ST.

City CHARLOTTE	State NC	Zip Code 28202-4200
-------------------	-------------	------------------------

FEC ID number of contributing
federal political committee.

C C00083535

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M 10	/	D D D 22	/	Y Y Y Y Y 2013
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Transaction ID : SA11.5010

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GENERAL ELECTRIC COMPANY PAC
Mailing Address 1299 PENNSYLVANIA AVE NW
SUITE 900

City WASHINGTON	State DC	Zip Code 20004-2414
--------------------	-------------	------------------------

FEC ID number of contributing
federal political committee.

C C00024869

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M M 12	/	D D D 21	/	Y Y Y Y Y 2013
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Transaction ID : SA11.5066

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Diane Black for Congress

Full Name (Last, First, Middle Initial) GENERAL ELECTRIC COMPANY PAC		Date of Receipt M M / D D / Y Y Y Y Y 12 / 24 / 2013
Mailing Address 1299 PENNSYLVANIA AVE NW SUITE 900		Transaction ID : SA11.5078
City WASHINGTON	State DC	
Zip Code 20004-2414		Amount of Each Receipt this Period 1000.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C C00024869		
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3500.00	

Full Name (Last, First, Middle Initial) INDEPENDENT BAKERS ASSOCIATION PAC (BAKEPAC)		Date of Receipt M M / D D / Y Y Y Y Y 12 / 21 / 2013
Mailing Address PO BOX 3731		Transaction ID : SA11.5059
City WASHINGTON	State DC	
Zip Code 20027-0231		Amount of Each Receipt this Period 500.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C C00099754		
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) ING US PAC		Date of Receipt M M / D D / Y Y Y Y Y 12 / 30 / 2013
Mailing Address 1 ORANGE WAY #C1N		Transaction ID : SA11.5100
City WINDSOR	State CT	
Zip Code 06095-4773		Amount of Each Receipt this Period 1000.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C C00184028		
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Diane Black for Congress

A. Full Name (Last, First, Middle Initial) INTERNATIONAL PAPER PAC		Date of Receipt M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address 1101 PENNSYLVANIA AVENUE NW SUITE 200		Transaction ID : SA11.5049
City WASHINGTON	State DC	
Zip Code 20004-2514		Amount of Each Receipt this Period 1000.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C C00034405		
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

B. Full Name (Last, First, Middle Initial) KOCHPAC-KOCH INDUSTRIES INC PAC		Date of Receipt M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 600 14TH ST NW, STE. 800		Transaction ID : SA11.5091
City WASHINGTON	State DC	
Zip Code 20005-2099		Amount of Each Receipt this Period 1000.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C C00236489		
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3500.00	

C. Full Name (Last, First, Middle Initial) MARATHON PETROLEUM CORP. EMPLOYEES PAC		Date of Receipt M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 539 S. MAIN ST.		Transaction ID : SA11.5092
City FINDLAY	State OH	
Zip Code 45840-3229		Amount of Each Receipt this Period 2500.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C C00496307		
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

SUBTOTAL of Receipts This Page (optional).....	4500.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Diane Black for Congress

A. Full Name (Last, First, Middle Initial)
MASSACHUSETTS MUTUAL LIFE INSURANCE PAC

Mailing Address 1295 STATE STREET

City SPRINGFIELD	State MA	Zip Code 01111-0001
---------------------	-------------	------------------------

FEC ID number of contributing
federal political committee.

C C00118943

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 30 / 2013

Transaction ID : SA11.5101

Amount of Each Receipt this Period

3000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MCDONALD'S PAC

Mailing Address 2111 MCDONALD'S DR

City OAK BROOK	State IL	Zip Code 60523-5500
-------------------	-------------	------------------------

FEC ID number of contributing
federal political committee.

C C00063164

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 24 / 2013

Transaction ID : SA11.5082

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MEDNEX INC PAC

Mailing Address 1301 CONCORD TERRACE

City SUNRISE	State FL	Zip Code 33323-2843
-----------------	-------------	------------------------

FEC ID number of contributing
federal political committee.

C C00469205

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 15 / 2013

Transaction ID : SA11.5046

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

6500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Diane Black for Congress

Full Name (Last, First, Middle Initial)

NAFCU - NATIONAL ASSOCIATION OF FEDERAL CREDIT UNIONS

Mailing Address 3138 10TH ST N

City

ARLINGTON

State

VA

Zip Code

22201-2160

FEC ID number of contributing
federal political committee.

C C00040659

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 30 / 2013

Transaction ID : SA11.5086

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS PAC

Mailing Address 2901 TELESTAR COURT

City

FALLS CHURCH

State

VA

Zip Code

22042-1260

FEC ID number of contributing
federal political committee.

C C00005249

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 21 / 2013

Transaction ID : SA11.5064

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF BROADCASTERS PAC

Mailing Address 1771 N ST NW

City

WASHINGTON

State

DC

Zip Code

20036-2800

FEC ID number of contributing
federal political committee.

C C00009985

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 30 / 2013

Transaction ID : SA11.5094

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

NATIONAL EMERGENCY MEDICINE PAC- NEMPAC

A.

Mailing Address P.O. BOX 619911

City

DALLAS

State

TX

Zip Code

75261-9911

FEC ID number of contributing
federal political committee.

C C00140061

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		20		2013

Transaction ID : SA11.5038

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

NATIONAL ROOFING CONTRACTORS PAC

B.

Mailing Address 10255 W HIGGINS ROAD
SUITE 600

City

ROSEMONT

State

IL

Zip Code

60018-5613

FEC ID number of contributing
federal political committee.

C C00244863

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		21		2013

Transaction ID : SA11.5058

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

RAYTHEON PAC

C.

Mailing Address 1100 WILSON BOULEVARD
STE 1500

City

ARLINGTON

State

VA

Zip Code

22209-3900

FEC ID number of contributing
federal political committee.

C C00097568

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		24		2013

Transaction ID : SA11.5081

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

REALTORS PAC

A.

Mailing Address 430 N MICHIGAN AVE.

City

CHICAGO

State

IL

Zip Code

60611-4011

FEC ID number of contributing
federal political committee.

C

C00030718

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2010.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		13		2013

Transaction ID : SA11.5034

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

SENIORS HOUSING PAC

B.

Mailing Address 5225 WISCONSIN AVE. NW. STE. 502

City

WASHINGTON

State

DC

Zip Code

20015-2034

FEC ID number of contributing
federal political committee.

C

C00325332

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		21		2013

Transaction ID : SA11.5073

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

TENN PAC

C.

Mailing Address 6213 CHARLOTTE PIKE
SUITE 112

City

NASHVILLE

State

TN

Zip Code

37209-3038

FEC ID number of contributing
federal political committee.

C

C00388421

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		15		2013

Transaction ID : SA11.5050

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

8000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Diane Black for Congress

Full Name (Last, First, Middle Initial)

THE BOEING COMPANY PAC

Mailing Address 1200 WILSON BOULEVARD

City

ARLINGTON

State

VA

Zip Code

22209-2300

FEC ID number of contributing
federal political committee.

C C00142711

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 21 / 2013

Transaction ID : SA11.5071

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

UNITED TECHNOLOGIES CORPORATION PAC

Mailing Address 1401 I STREET NW
SUITE 600

City

WASHINGTON

State

DC

Zip Code

20005-2225

FEC ID number of contributing
federal political committee.

C C00035683

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 24 / 2013

Transaction ID : SA11.5079

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

UPSPAC

Mailing Address 55 GLENLAKE PKWY NE

City

ATLANTA

State

GA

Zip Code

30328-3474

FEC ID number of contributing
federal political committee.

C C00064766

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 15 / 2013

Transaction ID : SA11.5051

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

4000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Diane Black for Congress

Full Name (Last, First, Middle Initial)

VALUE IN ELECTING WOMEN PAC

A.

Mailing Address 701 8TH ST NW STE 500

City
 WASHINGTON

State Zip Code
 DC 20001-3965

FEC ID number of contributing
federal political committee.

C C00327189

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 21 2013

Transaction ID : SA11.5069

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

WPX ENERGY INC PAC

B.

Mailing Address 801 PENNSYLVANIA AVE NW STE 315

City
 WASHINGTON

State Zip Code
 DC 20004-2712

FEC ID number of contributing
federal political committee.

C C00502518

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 30 2013

Transaction ID : SA11.5088

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

69500.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. SUZANNE JACKSON

Mailing Address 112 GLASS SPRINGS LN

City	State	Zip Code
FRANKLIN	TN	37064

Purpose of Disbursement
CATERING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		09		2013

Amount of Each Disbursement this Period

1270.00

Transaction ID : SB17.1021

B. TERESA KOEBERLEIN

Mailing Address 316 ANDERSON LN

City	State	Zip Code
HENDERSONVILLE	TN	37075

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2013

Amount of Each Disbursement this Period

67.20

Transaction ID : SB17.1047

c. USPS

Mailing Address 380 MAPLE ST

City	State	Zip Code
GALLATIN	TN	37066

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2013

Amount of Each Disbursement this Period

67.20

Transaction ID : SB17EM.77

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1337.20

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City	State	Zip Code
DALLAS	TX	75261

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		31		2013

Amount of Each Disbursement this Period

718.80

Transaction ID : SB17.1042

B. AMTRAK

Mailing Address 50 MASSACHUSETTS AVE

City	State	Zip Code
WASHINGTON	DC	20002

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2013

Amount of Each Disbursement this Period

372.00

Transaction ID : SB17.1044

C. AVENUE BANK

Mailing Address 2930 WEST END AVE.

City	State	Zip Code
NASHVILLE	TN	37203

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2013

Amount of Each Disbursement this Period

28.45

Transaction ID : SB17.1000

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1119.25

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. AVENUE BANK

Mailing Address 2930 WEST END AVE.

City	State	Zip Code
NASHVILLE	TN	37203

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2013

Amount of Each Disbursement this Period

18.00

Transaction ID : SB17.1001

B. AVENUE BANK

Mailing Address 2930 WEST END AVE.

City	State	Zip Code
NASHVILLE	TN	37203

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2013

Amount of Each Disbursement this Period

22.24

Transaction ID : SB17.1002

C. AVENUE BANK

Mailing Address 2930 WEST END AVE.

City	State	Zip Code
NASHVILLE	TN	37203

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2013

Amount of Each Disbursement this Period

18.00

Transaction ID : SB17.999

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

58.24

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. BELLWETHER CONSULTING GROUP

Mailing Address 1150 HUNGRYNECK BLVD STE C-336

City	State	Zip Code
MOUNT PLEASANT	SC	29464

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		30		2013

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB17.1017

B. BELLWETHER CONSULTING GROUP

Mailing Address 1150 HUNGRYNECK BLVD STE C-336

City	State	Zip Code
MOUNT PLEASANT	SC	29464

Purpose of Disbursement
FINANCE CONSULTING/POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		25		2013

Amount of Each Disbursement this Period

3060.34

Transaction ID : SB17.1019

C. BELLWETHER CONSULTING GROUP

Mailing Address 1150 HUNGRYNECK BLVD STE C-336

City	State	Zip Code
MOUNT PLEASANT	SC	29464

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		06		2013

Amount of Each Disbursement this Period

304.40

Transaction ID : SB17.1020

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

13364.74

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. BELLWETHER CONSULTING GROUP

Mailing Address 1150 HUNGRYNECK BLVD STE C-336

City	State	Zip Code
MOUNT PLEASANT	SC	29464

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		16		2013

Amount of Each Disbursement this Period

66.56

Transaction ID : SB17.1051

B. CAMPAIGN MAIL & INVOICES

Mailing Address 26 HADDONFIELD RD

City	State	Zip Code
CHERRY HILL	NJ	08002

Purpose of Disbursement
PRINTING/POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2013

Amount of Each Disbursement this Period

2.50

Transaction ID : SB17.1030

C. CAMPAIGN MAIL & INVOICES

Mailing Address 26 HADDONFIELD RD

City	State	Zip Code
CHERRY HILL	NJ	08002

Purpose of Disbursement
PRINTING/POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		29		2013

Amount of Each Disbursement this Period

13.13

Transaction ID : SB17.1032

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

82.13

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. CAMPAIGN MAIL & INVOICES

Mailing Address 26 HADDONFIELD RD

City	State	Zip Code
CHERRY HILL	NJ	08002

Purpose of Disbursement
PRINTING/POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		09		2013

Amount of Each Disbursement this Period

43.75

Transaction ID : SB17.1035

B. CAMPAIGN MAIL & INVOICES

Mailing Address 26 HADDONFIELD RD

City	State	Zip Code
CHERRY HILL	NJ	08002

Purpose of Disbursement
PRINTING/POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2013

Amount of Each Disbursement this Period

37.50

Transaction ID : SB17.1036

C. CAPITOL HILL CLUB

Mailing Address 300 1ST ST SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
CATERING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		17		2013

Amount of Each Disbursement this Period

245.33

Transaction ID : SB17.1003

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

326.58

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. CAPITOL HILL CLUB

Mailing Address 300 1ST ST SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
CATERING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		18		2013

Amount of Each Disbursement this Period

236.92

Transaction ID : SB17.1004

B. CAPITOL HILL CLUB

Mailing Address 300 1ST ST SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
CATERING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		18		2013

Amount of Each Disbursement this Period

156.04

Transaction ID : SB17.1005

C. CAPITOL HILL CLUB

Mailing Address 300 1ST ST SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
CATERING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		19		2013

Amount of Each Disbursement this Period

170.71

Transaction ID : SB17.1007

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

563.67

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. COMMERCE STREET

Mailing Address PO BOX 330763

City	State	Zip Code
NASHVILLE	TN	37203

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		28		2013

Amount of Each Disbursement this Period

425.00

Transaction ID : SB17.1016

B. COMMERCE STREET

Mailing Address PO BOX 330763

City	State	Zip Code
NASHVILLE	TN	37203

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		06		2013

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.1018

C. COMPLIANCE CONSULTING LLC

Mailing Address P.O. BOX 365

City	State	Zip Code
MCLEAN	VA	22101

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		04		2013

Amount of Each Disbursement this Period

1525.00

Transaction ID : SB17.1009

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2950.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. COMPLIANCE CONSULTING LLC

Mailing Address P.O. BOX 365

City	State	Zip Code
MCLEAN	VA	22101

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2013

Amount of Each Disbursement this Period

1525.00

Transaction ID : SB17.1010

B. COMPLIANCE CONSULTING LLC

Mailing Address P.O. BOX 365

City	State	Zip Code
MCLEAN	VA	22101

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		06		2013

Amount of Each Disbursement this Period

1525.00

Transaction ID : SB17.1011

C. CONGRESSIONAL INSTITUTE

Mailing Address 1001 N FAIRFAX ST.

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		19		2013

Amount of Each Disbursement this Period

890.00

Transaction ID : SB17.1028

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3940.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. DELTA AIRLINES

Mailing Address 1212 NEW YORK AVE NW STE 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2013

City	State	Zip Code
WASHINGTON	DC	20005

Amount of Each Disbursement this Period

524.80

Purpose of Disbursement
TRAVELCategory/
Type

Transaction ID : SB17.1043

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. ELAVON

Mailing Address 7300 CHAPMAN HWY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2013

City	State	Zip Code
KNOXVILLE	TN	37920

Amount of Each Disbursement this Period

75.51

Purpose of Disbursement
CREDIT CARD MERCHANT FEESCategory/
Type

Transaction ID : SB17.1012

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. ELAVON

Mailing Address 7300 CHAPMAN HWY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2013

City	State	Zip Code
KNOXVILLE	TN	37920

Amount of Each Disbursement this Period

64.93

Purpose of Disbursement
CREDIT CARD MERCHANT FEESCategory/
Type

Transaction ID : SB17.1013

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

665.24

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. FINEMONDO

Mailing Address 1319 F ST NW

City	State	Zip Code
WASHINGTON	DC	20004

Purpose of Disbursement
CATERING/FACILITY RENTAL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		05		2013

Amount of Each Disbursement this Period

2637.00

Transaction ID : SB17.1008

B. FRONTIER AIRLINES

Mailing Address 7001 TOWER RD

City	State	Zip Code
DENVER	CO	80249

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2013

Amount of Each Disbursement this Period

413.60

Transaction ID : SB17.1045

C. GRASSROOTS TARGETING

Mailing Address 814 KING ST STE 420

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		17		2013

Amount of Each Disbursement this Period

2511.62

Transaction ID : SB17.1052

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5562.22

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. GRIDIRON COMMUNICATIONS

Mailing Address PO BOX 1308

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		26		2013

City	State	Zip Code
GRANGER	IN	46530

Amount of Each Disbursement this Period

2149.27

Purpose of Disbursement
PRINTING/POSTAGECategory/
Type

Transaction ID : SB17.1034

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. INTERMEDIA

Mailing Address 156 WEST 56TH ST STE 1601

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2013

City	State	Zip Code
NEW YORK	NY	10019

Amount of Each Disbursement this Period

9.05

Purpose of Disbursement
WEB SERVICECategory/
Type

Transaction ID : SB17.1048

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. INTERMEDIA

Mailing Address 156 WEST 56TH ST STE 1601

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2013

City	State	Zip Code
NEW YORK	NY	10019

Amount of Each Disbursement this Period

9.95

Purpose of Disbursement
WEB SERVICECategory/
Type

Transaction ID : SB17.1049

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2168.27

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. INTERMEDIA

Mailing Address 156 WEST 56TH ST STE 1601

City	State	Zip Code
NEW YORK	NY	10019

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		04		2013

Amount of Each Disbursement this Period

9.95

Transaction ID : SB17.1050

B. INTUIT

Full Name (Last, First, Middle Initial)

Mailing Address 2632 MARINE WAY

City	State	Zip Code
MOUNTAIN VIEW	CA	94043

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		19		2013

Amount of Each Disbursement this Period

29.44

Transaction ID : SB17.1040

C. INTUIT

Full Name (Last, First, Middle Initial)

Mailing Address 2632 MARINE WAY

City	State	Zip Code
MOUNTAIN VIEW	CA	94043

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		19		2013

Amount of Each Disbursement this Period

29.44

Transaction ID : SB17.1041

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

68.83

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. JOHNNY'S HALF SHELL

Mailing Address 400 NORTH CAPITOL ST. NW

City	State	Zip Code
WASHINGTON	DC	20001

Purpose of Disbursement
CATERING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 13 / 2013

Amount of Each Disbursement this Period

390.00

Transaction ID : SB17.1006

B. JOYNER & HOGAN PRINTERS

Mailing Address PO BOX 60069

City	State	Zip Code
NASHVILLE	TN	37206

Purpose of Disbursement
PRINTING/POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 17 / 2013

Amount of Each Disbursement this Period

1329.79

Transaction ID : SB17.1031

C. JOYNER & HOGAN PRINTERS

Mailing Address PO BOX 60069

City	State	Zip Code
NASHVILLE	TN	37206

Purpose of Disbursement
PRINTING/POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 12 / 2013

Amount of Each Disbursement this Period

989.82

Transaction ID : SB17.1033

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2709.61

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. KIMBIA

Mailing Address 1050 E 11TH ST STE 200

City	State	Zip Code
AUSTIN	TX	78702

Purpose of Disbursement
VOID CHECK- CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		19		2013

Amount of Each Disbursement this Period

2745.17

Transaction ID : SB17.1053

B. PARK CITY TRANSPORTATION

Mailing Address PO BOX 680117

City	State	Zip Code
PARK CITY	UT	84068

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		09		2013

Amount of Each Disbursement this Period

403.80

Transaction ID : SB17.1046

C. PATTON BOGGS LLP

Mailing Address 2550 M ST NW

City	State	Zip Code
WASHINGTON	DC	20037

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2013

Amount of Each Disbursement this Period

2512.00

Transaction ID : SB17.1022

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2745.17

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. PATTON BOGGS LLP

Mailing Address 2550 M ST NW

City
WASHINGTONState
DCZip Code
20037Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		12		2013

Amount of Each Disbursement this Period

1250.00

Transaction ID : SB17.1023

B. PATTON BOGGS LLP

Mailing Address 2550 M ST NW

City
WASHINGTONState
DCZip Code
20037Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		16		2013

Amount of Each Disbursement this Period

1250.00

Transaction ID : SB17.1024

C. ST. REGIS HOTEL

Mailing Address 2300 DEER VALLEY DR. E

City
PARK CITYState
UTZip Code
84060Purpose of Disbursement
FACILITY RENTAL/CATERING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2013

Amount of Each Disbursement this Period

1163.59

Transaction ID : SB17.1015

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3663.59

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. THE CLUB AT FAIRVUE PLANTATION

Mailing Address PO BOX 282408

City	State	Zip Code
NASHVILLE	TN	37228

Purpose of Disbursement
FACILITY RENTAL/CATERING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		09		2013

Amount of Each Disbursement this Period

4313.57

Transaction ID : SB17.1014

B. USPS

Mailing Address 380 MAPLE ST

City	State	Zip Code
GALLATIN	TN	37066

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		16		2013

Amount of Each Disbursement this Period

92.00

Transaction ID : SB17.1029

C. VERIZON WIRELESS

Mailing Address PO BOX 553

City	State	Zip Code
WARRENDALE	PA	15086

Purpose of Disbursement
PHONE SERVICE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		10		2013

Amount of Each Disbursement this Period

286.30

Transaction ID : SB17.1025

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4691.87

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 51 OF 51

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. GREG GIFFIN

Mailing Address 333 COMMERCE ST STE 1500

City NASHVILLE State TN Zip Code 37201

Purpose of Disbursement
VOID CHECK- CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 19 / 2013

Amount of Each Disbursement this Period

-1000.00

Transaction ID : SB20A.234

Category/
Type

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

Category/
Type

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

Category/
Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

-1000.00

-1000.00